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A/Re

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PTO/SB/50 (4/98)

Approved for use through 09/30/2000. OMB 0651-0033

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

Attorney Docket No.	24104
First Named Inventor	Purvis
Original Patent Number	5,842,685
Original Patent Issue Date (Month/Day/Year)	12/1/98
Express Mail Label No.	EL369537273US

APPLICATION FOR REISSUE OF:
(check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS

1. ☒ * Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification and Claims (amended, if appropriate)
3. ☒ Drawing(s) (proposed amendments, if appropriate)
4. ☒ Reissue Oath / Declaration (original or copy)
(37 C.F.R. § 1.175)(PTO/SB/51 or 52)
5. Original U.S. Patent
☒ Offer to Surrender Original Patent (37 C.F.R. § 1.178)
(PTO/SB/53 or PTO/SB/54)
-or-
☐ Ribboned Original Patent Grant
☐ Affidavit / Declaration of Loss (PTO/SB/55)
6. Original U.S. Patent currently assigned?
☒ Yes ☐ No
(If Yes, check applicable box(es))
☒ Written Consent of all Assignees (PTO/SB/53 or 54)
☒ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney

ACCOMPANYING APPLICATION PARTS

7. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
8. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
9. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
10. ☐ * Small Entity Statement(s) ☒ Statement filed in prior application,
Status still proper and desired
(PTO/SB/09-12)
11. ☒ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. ☐ Other:

* NOTE FOR ITEMS 1 & 10: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.29).

14. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

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Registration No. (Attorney/Agent)

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Signature

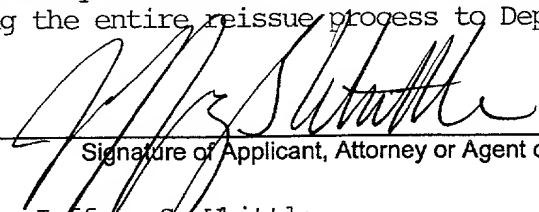
Jeffrey S. Whittle

Date

10/31/00

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 24104		
Claims as Filed - Part 1								
Claims in Patent	For	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 11	Total Claims (37 CFR 1.16(j))	(B) 11	**** 0 =	x \$	=	or	x \$ =	
(C) 1	Independent Claims (37 CFR 1.16(i))	(D) 1	* 0 =	x \$	=		x \$ =	
Basic Fee (37 CFR 1.16(h))				\$355			\$	
Total Filing Fee				\$ 355		OR	\$	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 22	MINUS	** 20	= 2	x \$ 9 =	18	or	x \$ =
Independent Claims (37 CFR 1.16(i))	*** 2	MINUS	***** 3	= 0	x \$ =			x \$ =
Total Additional Fee				\$18		OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p>								
<p><input checked="" type="checkbox"/> Please charge Deposit Account No. <u>01-0484</u> in the amount of <u>\$373</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>01-0484</u>. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.</p>								
<p>X The Commissioner is further hereby authorized to charge any additional fees which may be required during the entire reissue process to Deposit Account No. 01-0484.</p>								
<u>10-31-00</u> Date		<div style="text-align: center;">  Signature of Applicant, Attorney or Agent of Record Jeffrey S. Whittle Typed or printed name </div>						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

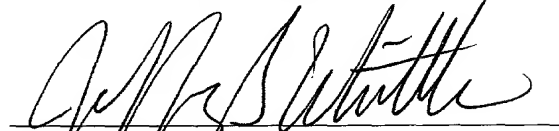
REISSUE APPLICATION BY THE ASSIGNEE, OFFER TO SURRENDER PATENT		Docket Number (Optional) 24104
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s): Purvis et al.		
Patent Number 5,842,685	Date Patent Issued 12-1-98	
Title of Invention Temporary Guard Rail System		
<u>Harrison G. Purvis</u> is the assignee of the entire interest in the original patent. I offer to surrender the original patent. <input checked="" type="checkbox"/> A certificate under 37 CFR 3.73(b) is attached. I am authorized to act on behalf of the assignee.		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.		
Name of assignee Harrison G. Purvis		
Signature of person signing for assignee <i>Harrison G. Purvis</i>		Date 10/9/2000
Typed or printed name and title of person signing for assignee Harrison G. Purvis, individually		

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

In re Reissue Patent Application for
Patent No. 5,842,685 for:
PURVIS ET AL.
Serial No. 08/620,211
Filing Date: **March 29, 1996**
Issue Date: **December 1, 1998**

provisions of 37 CFR §1.97 and Section 609 of the MPEP.

Respectfully submitted,



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CERTIFICATE OF EXPRESS MAILING

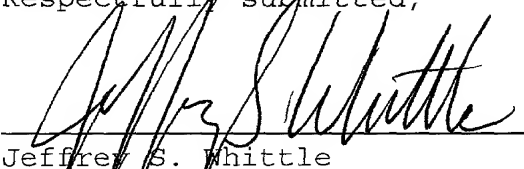
I HEREBY CERTIFY that the Citation Under 37 CFR 1.97
for the Reissue Patent Application for **Patent No. 5,842,685** is
being deposited with the United States Postal Service under
Express Mail Label No. EL36953727345 addressed to:
ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231,
this 31st day of October, 2000.


KATHY L. TISSUE

In re Reissue Patent Application for
Patent No. 5,842,685 for:
PURVIS ET AL.
Serial No. 08/620,211
Filing Date: March 29, 1996
Issue Date: December 1, 1998

Please charge all costs incurred by reason of the above
request to Deposit Account No. 01-0484.


Respectfully submitted,



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CERTIFICATE OF EXPRESS MAILING

I HEREBY CERTIFY that the Request for Transfer of
Drawings for the Reissue Patent Application for Patent No.
5,842,685 is being deposited with the United States Postal
Service under Express Mail Label No. EL369537273 US
addressed to: ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON,
D.C. 20231, this 31st day of October, 2000.



KATHY L. TISSUE